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Bib Data Sheet

CONFIRMATION NO. 6684

|                                    |                                                               |                     |                               |                                          |
|------------------------------------|---------------------------------------------------------------|---------------------|-------------------------------|------------------------------------------|
| <b>SERIAL NUMBER</b><br>10/730,912 | <b>FILING OR 371(c)<br/>DATE</b><br>12/10/2003<br><b>RULE</b> | <b>CLASS</b><br>348 | <b>GROUP ART UNIT</b><br>2621 | <b>ATTORNEY DOCKET<br/>NO.</b><br>118014 |
|------------------------------------|---------------------------------------------------------------|---------------------|-------------------------------|------------------------------------------|

**APPLICANTS**

Masayuki Ishikura, Aichi, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 2002-359158 12/11/2002

JAPAN 2003-112466 04/17/2003

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

03/10/2004

|                                                                                                                                                     |                                      |                                 |                               |                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no                                                     | <b>STATE OR<br/>COUNTRY</b><br>JAPAN | <b>SHEETS<br/>DRAWING</b><br>10 | <b>TOTAL<br/>CLAIMS</b><br>11 | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| 35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                      |                                 |                               |                                    |
| Verified and Acknowledged<br>Examiner's Signature: <i>[Signature]</i> Initials: <i>IC</i>                                                           |                                      |                                 |                               |                                    |

**ADDRESS**

25944

**TITLE**

Vehicle periphery monitoring apparatus

|                                       |                                                                                                                   |                                                                |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| <b>FILING FEE<br/>RECEIVED</b><br>770 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                       |                                                                                                                   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                       |                                                                                                                   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                       |                                                                                                                   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
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|                                       |                                                                                                                   | <input type="checkbox"/> Credit                                |